

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
<b>BEST AVAILABLE COPY</b>			
FEE DETERMINATION	<i>[Signature]</i>		04/10/01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	C.V.	17 C 5 03	05/11/01
RESPONSE FORMALITY REVIEW	Wt	571	08/02/01

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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861  
9/3/01